CONFERENCE INFORMATION REPORT

JURY TRIAL NON-JURY TI	RIAL	ARBITRATION
SERVICE OF PROCESS MADE	(Date)	
SHORT CAPTION:		
TRIAL COUNSEL		
REPRESENTING		
LAW FIRM		
ADDRESS		
TELEPHONE & FAX		
DISCOVERY COMPLETED	IF NOT, WHEN?	(Date)
Yes PROTRACTED DISCOVERY REQUIRED?	Yes/No	
IF YES, DESCRIBE PROPOSED DISCOVERY SUGGEST DATES FOR SEGMENTS:	SEGMENTS BY SUBJE	CT MATTER OR PARTIES
OTHER PRETRIAL MATTERS:		
SETTLEMENT CONFERENCE REQUESTED?	,	
TRIAL TIME: TIME TO PRESENT YOUR CA	ASE	
OTHER COMMENTS:		
DATE:		
	SIGNATURE OF COU	NSEL
	TYPE OR PRINT NAM	

This form should be faxed to Chambers at 267.299.5078 or mailed or hand delivered to Chambers, Room 4001, U.S. Courthouse, 601 Market Street, Philadelphia, PA 19106-1741. O:\forms\conference information report.wpd